HAYWARD FIRE DEPARTMENT

A Certified Unified Program Agency 777 B Street, Hayward, CA 94541-5007

TEL. (510) 583-4910 ■ FAX (510) 583-3641 ■ TDD (510) 247-3340

BUSINESS ACTIVITIES FORM

APPLICATION FOR A CONSOLIDATED PERMIT/REGISTRATION UNIFIED HAZARDOUS MATERIALS / HAZARDOUS WASTE MANAGEMENT REGULATORY PROGRAM

(Before completing this form, please read the instructions printed on a separate page.)

Type of Application: (Please check one.)	☐ Initial Regis	tration	☐ Renewal
1. Facility Information		5. Aboveground Storage Tank Program	(AGT)
Name: Address:		Do you have aboveground storage tanks containing petroleum products; at least one is greater than 660 gallons; or total	☐ Yes
Hayward, CA (ZIP)		aboveground storage capacity for facility greater than 1,320 gallons?	□ No
Telephone:		6. Hazardous Waste Generator Program	n (HWG)
2. Hazardous Materials Storage Program		Do you generate hazardous waste on site?	☐ Yes ☐ No
Do you have on site hazardous materials – solids, extremely hazardous substances specified in 40CF A or B; or radiological materials?	RPart 355 Appendix	Quantity generated per month (gal or lbs)	110
Number of Hazard Classes	110	Do you consolidate hazardous waste from remote sites at this facility?	☐ Yes ☐ No
Total Liquids	gallons	7. Recycler (Onsite or Off-Site)	
Total Solids	pounds	Do you recycle your own waste onsite?	☐ Yes
Total Gases (at STP)	cu. ft.	Do you recycle your own waste onsite.	□ No
Total Radiological Materials 3. Accidental Release Prevention Program	curies (CalARP)	Do you receive hazardous waste from other facilities and recycle it on your site?	☐ Yes ☐ No
		8. Tiered Permit Program (On-site Treatment of HW)	
Do you have any regulated substance listed in Tables 1, 2, and/or 3 of the CalARP Program (CCR Title 19/Div. 2/Chapter.4.5)?	☐ Yes ☐ No	Do you treat, on this site, any hazardous waste you generate?	Yes No
4. Underground Storage Tank Program (UST)		Do you have a Tiered Permit?	☐ Yes
Do you own or operate Underground Storage Tanks (USTs) at this facility?	☐ Yes ☐ No	Number of Treatment Units under Tiered Per	□ No mit:
If "yes", list material stored and tank capacity in gallons:		Permit-By-Rule	
if yes, its material stored and tank capacity in gations.		Conditionally Authorized Conditionally Exempt – Specified Waste	
		Conditionally Exempt – Small Quantity	
		Conditionally Exempt – Limited	
		Conditionally Exempt – Commercial Laur	ndry
8. Certification and Signature			
I hereby certify that I used reasonab to the best of my knowledge, the info		uring this application. I have reviewed the application is true and correct.	cation and,
Signature Prin.		inted Name and Title Dat	e Signed
Reviewed by:		Date reviewed:	

CUPA Application/dmg April 2000

APPLICATION FOR A CONSOLIDATED PERMIT/REGISTRATION UNIFIED HAZARDOUS MATERIALS / HAZARDOUS WASTE MANAGEMENT REGULATORY PROGRAM

INSTRUCTIONS

Read the following instructions before completing this application form.

Type of Application: Indicate by checking the appropriate box if this application is a first time *(initial)* application, a *modification* to an existing permit/registration, or a *renewal* of an expired or expiring permit/registration.

1. Facility Information

Write the name of the facility and its location. Provide street address, Zip Code and phone number. No P. O. Box, please.

2. Hazardous Materials Storage Program

Refer to the "Hazardous Materials Hazard Categories" (goldenrod pamphlet*) provided with this application. Note the "Permit" and "Report" quantities for each hazard category. Using the "Hazardous Materials Worksheet" (yellow sheet*) enclosed with this application, estimate the quantity of materials you have under each hazard category. Enter totals in Section 2 of this application form. Liquids are reported in gallons; solids are reported in pounds; and gases are reported in cubic feet at standard temperature and pressure (STP, or 32°F temperature and 14.7 psi – pounds per square inch – pressure). Federal 40CFR355 extremely hazardous substances (EHS) are listed in the blue pamphlet.

If this is a renewal you may omit the worksheet and provide the required information from past records, if still accurate.

3. Accidental Release Prevention Program

Refer to the "Tables of Regulated Substances under the CalARP Program" (pink pamphlet*) provided with this application. Table 1 and Table 2 list federally regulated substances while Table 3 lists substances regulated in California. A substance listed in Table 1 or Table 2 may also be listed in Table 3. Review your inventory against the list of regulated substances and determine whether you handle any listed substance. Check the YES box only if the quantity of the regulated substance you handle is equal to or greater than the listed threshold quantity (TQ). Note that for substances that appear in both federal and state lists, the TQs in Table 3 may be lower than the TQs in Table 1 or Table 2.

4. Underground Storage Tank Program

If you store hazardous materials or hazardous waste in underground storage tanks, you are subject to additional federal, state and local regulations. State laws distinguish between USTs used to store (motor-vehicle) fuel or other petroleum products (gasoline, diesel, jet fuel, new motor oil) and USTs used to store other hazardous substances (non-petroleum solvents such as alcohols, and non-fuels like waste oil and other hazardous wastes). Indicate the material contained in, and the capacity in gallons of each tank.

5. Aboveground Storage Tank Program

If you have one or more aboveground storage tanks (AST) for petroleum products, including oil and waste oil, this program covers you ONLY if at least one of them is 660 gallons or greater in capacity; OR if the total aboveground storage capacity for the facility is 1,320 gallons or greater. If you are covered, then you are required to register with the State Water Resources Control Board and to submit a Spill Prevention, Control, and Countermeasure Plan (SPCC).

6. Hazardous Waste Generator Program

If you generate hazardous waste (including waste oil) from your operations in this facility, indicate the average quantity you generate per month (include all hazardous wastes). Specify whether the quantity is in *gallons* or *pounds*. Indicate also if you collect hazardous wastes from remote sites and consolidate them at this facility.

7. Recycling

If you recycle (i.e. re-use after minor treatment) your own hazardous waste in this facility, you are an onsite recycler. If you recycle other facility's waste after bringing it into your facility, you are an off site recycler.

8. Tiered Permit Program

If you treat your own hazardous waste in this facility, you are subject to federal and/or state requirements. The Hayward Fire Department, as CUPA, issues a "tiered permit" for on-site treatment of hazardous waste. Indicate the number of permitted treatment units you have on site, under each tier named in the application. If you treat hazardous waste without a tiered permit, notify the Fire Department promptly for guidance on how to obtain a tiered permit.

Certification and Signature

Read the certification statement and sign your application. Print your name and title and write the date you signed the application.

* If no pamphlets/lists came with this form, call (510) 583-4910 for a copies, if you do not already have one on file.